		Т	10/05/22 (12-0
PARTION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional)	021653-003500US
FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			
Application Number 10/773,961		Filed February 6, 2004	
For A METHOD AND STRUCTURE FOR LAYOUT O AREA FOR SEMICONDUCTOR INTEGRATED CIRCU			
Art Unit 2815		Examiner Richards, N	Drew
This is a request under the provisions of 37 CFR 1.136 application.	i(a) to extend the per	riod for filing a reply in the	above identified
The requested extension and fee are as follows (check	time period desired	and enter the appropriate	e fee below):
	Fee	Small Entity Fee	
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 1020
Four months (37 CFR 1.17(a)(4))	\$1590	\$795 .	\$
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
Applicant claims small entity status. See 37 CFF	R 1.27.		
A check in the amount of the fee is enclosed.			
Payment by credit card. Form PTO-2038 is atta	ched.		
The Director has already been authorized to cha	arge fees in this appli	ication to a Deposit Accou	ınt.
The Director is hereby authorized to charge any Deposit Account Number <u>20-1430</u>		required, or credit any ove closed a duplicate copy of	
WARNING: Information on this form may become public Provide credit card information and authorization on F		ation should not be included	on this form.
I am the applicant/inventor.			
assignee of record of the entire Statement under 37 CFR 3			
attorney or agent of record. Re	egistration Number _	39,496	
attorney or agent under 37 CFF Registration number if acting u			
0202	1	November 29	9, 2005
Signature		Date	
Kent J. Tobin, Reg. No. 39,496		650-326-2400	
Typed or printed name		Telephone Number	
IOTE: Signatures of all the inventors or assignees of record of the entine signature is required, see below.	ire interest or their represe	entative(s) are required. Submit r	nultiple forms if more than
Total of forms are su	ubmitted.		•